

KING COUNTY ALCOHOLISM AND SUBSTANCE ABUSE

ADMINISTRATIVE BOARD

REGULAR BOARD MEETING

THURSDAY, JUNE 14, 2001

KCASAAB Members Present: Joan Clement, Linda Brown, Nancy Code, Keith Williams, Yasmin Smith

KCASAAB Members Excused: Jim Harbaugh, Bob Seidensticker, Joyce Proudlock

Staff Attending: Jackie MacLean, Cindy Bergh, Sherry Hamilton, Geoff Miller, Patrick Vanzo, Larry Neilson, Scott Neal, Rhoda Naguit's absence was noted. She is in the Philippines following a death in the family.

Guests Present: Pat Knox, Recovery Centers of King County, Al Sweeten, Seattle Indian Health Board

The regular meeting of the King County Alcoholism and Substance Abuse Administrative Board (KCASAAB) was convened at the Conference Room of the Dutch Shisler Sobering Center, 1930 Boren Avenue in Seattle. In lieu of Chair Jim Harbaugh's absence, Joan Clement called the meeting to order at 12:20 p.m., followed by introductions of all members and guests.

I. MINUTES

There was no quorum to approve the minutes of the May 16, 2001 meeting.

II. CHAIRMAN'S REPORT

Chairman Harbaugh was absent; there was no report.

III. BUDGET PROCESS REPORT – Patrick Vanzo

A. Budget Update

Handout: 2001-03 Omnibus Operating Budget for DSHS.

The Senate has an approved budget; the House has a somewhat different proposal. To veteran observers of the Olympia scene, the situation recalls bygone years when suppliers were paid by promissory notes until a budget was passed in September. If the budget is not passed by the end of June, legislators will be called back for 3rd extraordinary session.

<p>This material is available in alternate formats. For more information, please contact Rhoda A. Naguit at 206-296-7623 Voice or 206-296-7596 TTY.</p>
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Under the revised Involuntary Commitment law in Eastern Washington, more money has been appropriated, in effect new money for residential treatment there. This frees up capacity at Pioneer Center North. In all, \$2.8M has been appropriated for people gravely disabled by drugs and alcohol, including methadone. A supplemental Drug Court appropriation has been made, but it does not apply to King County. KC drug courts will be funded at the same level as last year.

There is a noted increased in vendor payment for SSI client treatment. The VOTE program has been eliminated. Specialty funding of programs has generally been reverted to funding from the General Fund after one or two biennia of earmarked funds.

The two Houses are now in reconciliation conferences again. The House is trying to show some leadership, but the parties are tied 49-49, inhibiting conclusive agreement. Transportation funding is the chief unresolved issue.

MHCADSD is not directly affected by budget cuts. DCHS cuts came mostly from Community Services Division (CSD) and youth service providers.

It was asked whether substance abuse treatment will be impacted by DPH/CSD cuts. DPH is being cut by \$1M. Joan replied that we need to monitor very carefully what's going on, as this cutback will have a major impact on the ATOD Prevention section.

IV. MANAGER'S REPORT

A. Personnel Update

An executive search firm has been employed by Barbara Gletne to advertise the Mental Health Chemical Abuse and Dependency Services Division (MHCADSD) Manager's position. The process is expected to take three to four months.

Geoff's tenure as Drug & Alcohol Coordinator has been extended until the new Division Manager is hired.

B. Seattle Times' Article

An article will be coming out in Friday's Seattle TIMES regarding friction between UBH and the Mental Health providers. The reporter, Marcia King, is waiting for the state budget to come out to evaluate how it will impact care..

C. CHAT Proviso

Options on how to operate CHAT are included in the Department's Master Plan to be submitted to the King County Executive and King County Council. The option that appears most likely is increasing CHAT's contract work for outside agencies. Jodi Riley-Kauer has been seeking and getting some of this work, helping to increase Cedar Hills'

revenues. This could balance CHAT's budget by the end of next year. The Division is now working on a global plan involving Facilities and Public Health, as well as lobbying DASA Chief Ken Stark for increased funding. The County has been making CX (general fund) cuts in budget.

Linda Brown asked about options being considered for Cedar Hills. Jackie MacLean replied that a document is now in development, which addresses this issue. This document will be made available to the board for review and input as soon as it's completed.

D. Joanne Asaba Memorial Fund Update

A Joanne Asaba Memorial Fund has been settled upon as a trust fund for Joanne and Neil's children. To date, more than \$2,000 has been collected. The coordinators are expecting to wrap up the pledges this week..

E. Grant Applications Update

Grant applications under development include a no-cost extension request for Methadone; a Year Two request for the Youth Case Management project; and a CSAT application for a second mobile methadone van, developed in cooperation with Evergreen Treatment Services. There are also an expansion grant targeted at homeless women for Dutch Shisler Sobering Service Center. Tribes & American Indians, five tribes and tribal organizations are participating, including United Indian of All Tribes Foundation, Indian Council, Northwest Indian Health Board, and the Snoqualmie tribe. They are requesting \$150,000 for a planning year, evolving a plan for Phase II implementation funding. This must be submitted by July 22, 2001.

The MHCADSD/TASC grant was submitted on time. (**NOTE:** This grant has subsequently been approved.)

Federal funding currently provides for 125 Methadone slots; these never have been entirely filled. The question was raised, when can they transition client into Title XIX funding. Continuing with approximately 75 slots. Geoff wants to continue evaluation of Mobile Methadone as a substitute treatment. The overall impact is not as great as was envisioned; the costs of the van and evaluation pump up costs more than anticipated, but the individual treatment slots have been cost-effective. The County's Methadone licenses are now up to 3,150 individual places. As of three weeks ago there is a waiting list of 600 at the Needle Exchange. About 100 of these individuals are Title XIX eligible and just waiting for the funding.

Joan questioned how accurate these numbers are. Geoff replied that the 600 figure for the waiting list is about right. Continued treatment while addicts are in jail has reduced the number of heroin deaths upon release.

The guiding philosophy is to max out our dollars and spend every available dollar on treatment.

On paper King County's Methadone capacity is larger than that of San Francisco, but that number includes clients from outlying counties. In the new Biennium, DASA would like to start other counties out with Methadone programs. Thurston/Mason RSN would be the first targeted for expansion.

F. Biennial Planning Update

First round of budget figures came from the state on June 11th (ten days later than promised). Significant changes are seen in money management, including that the State no longer wants us to take administration from federal block grant dollars; instead we'll have to take administration out of our State funding. No federal block grant funds for opiate substitution treatment were provided, however, a like amount of state funds were provided so we did not experience a loss of revenues. We have been using federal block grant funds for vouchers to begin treatment for individuals until another source of funding (e.g. Title XIX) can be found. It will take longer to complete the budget for State contract. A draft of State plan was distributed with the proviso. The Board has not approved the State Plan and Needs Assessment. When done reviewing plan versus our biennial plan, we will submit hard numbers. Harvey Funai has agreed to this. This will give KCASAAB enough time to process the plan and approve it.

The budget was handed out. This will be discussed at length at the July 12 board meeting. The budget is sketchy in detail, but the state has told us how much we can expect in aggregate. The fifth amendment to the budget shows current dollars and how we're spending them. Items with black highlighting are those that we cannot expand this biennium. Title XIX (cost reimbursement) will be broken out separately. In 1998-99 we agreed to a new funding formula; resulting in a \$1.6M decrease. The new budget is short of \$1.6M from the last biennium's funding levels, not including the SSI pilot project, etc. Over all we are at \$2.5M less than at the end of the last biennium in 1999. Our overall substance abuse funding will be approximately even if the budget process goes as predicted. Whatever is paid for Title XIX service will be done. The providers will get a modest increase in their rates.

There will be reductions in SAPT ADATSA, VRDE ADATSA, and VRDE Detox. Management planned for this biennium's reduced, and has prepared providers for their new base level of funding. In all probability we'll be able to bring up the funding slightly in 2002.

Detoxification services will hopefully be a Title XIX billing modality before the end of 2001. Cost analysis has been done and has been submitted to DASA for review. This will increase bed/day rates.

G: Legislative Update

The State Mental Health Division budget cuts will be phased in over six years. Language to mitigate the \$30M loss of funds to Mental Health has been included. The fact that the legislators are coming out with competing forms of the budget is not a favorable sign for prompt resolution.

The two JLARC bills were the last that Governor Locke signed, vetoing certain parts of each bill. We now have until October 2002, a longer period to bring the rates down.

H. Monthly Utilization Report

Copies of the Monthly Utilization Report were distributed.

Full capacity at Detox was below the days delivered. Recovery Centers of King County (RCKC) has been trying to streamline the system to utilize full capacity. That strategy has worked, the system is delivering more services. 50% come through King County Assessment Center (KCAC), many more from Harborview and the Crisis Triage Unit (CTU).

Emergency Service Patrol (ESP) capacity shows consistent demand for services. The Sobering Center is above capacity, struggling with capacity challenges. DSSSC's capacity is only supposed to be around 60, but utilization has frequently been over 100. Homeless shelters within the immediate area have excluded clients with alcohol on their breath, increasing the caseload at Sobering. The CPI Group has been working this issue.

Pat Knox noted that good solutions are being formulated to prepare for next winter. An .08% BAL is required to spend a night at Detox. Detox thus has become a *de facto* shelter, harboring individuals who have been diverted from regular homeless shelters. RCKC has stopped providing blankets for clients except those close to hypothermia. This serves as a disincentive. Dr. Knox feels blankets are a luxury item.

KCAC utilization is mostly unchanged. An issue has been staff reduction at the DSHS CSOs; Assessment Center personnel are working around these.

CHAT review shows that the facility has billed \$31,000 more in May than in April. Jodi is hoping to implement one-rate treatment for residential clients, using ASAM criteria to determine the rate. This would simplify administration by reducing four contracts to one and four separate charts to one. The single rate would be an average of the current modality-based rates. Co-Occurring Disorders would continue to be a special program with its own rate.

There does not appear to be a logical process to how this is done. Al Sweeten asked whether increased numbers of clients at Sobering and Detox, KCAC referrals accounting for about half, is a problem because assessments are not performed. It was noted that any

time CHAT's population increases, the providers' numbers decrease. Geoff reiterated that placements should be done evenly across all providers, including Cedar Hills.

V. Synar Presentation – *Scott Neal*

Handout: 2001 Synar Compliance Rates

Synar is the federal law mandating compliance with rules about selling alcohol and tobacco products to minors. Federal substance abuse block grants mandate random checks on retailers; his project checks Synar compliance in county. In this State WSLCB polices alcohol, while Public Health Seattle/King County polices tobacco in the County. Scott's unit educates retailers in solving problems. The State will be targeting the least compliant counties for outreach. Synar targets an 80% compliance rate in refusing to sell tobacco to minors. Washington is one of only four states that have met the 80% standard since '93. Scott's unit also worked on the new license/ID cards to be issued by the Department of Licensing. Washington State has been recognized for its outstanding work in this area.


Scott was thanked for his presentation; enforcement in this area has been a demonstrable success in King County.

There being no further business, the meeting was adjourned at 1:46 p.m.

Prepared by:

Attested by:

Larry S. Neilson
Recording Secretary


Jim Harbaugh
Chairman